### POLICY AND COMMUNICATIONS BULLETIN THE CLINICAL CENTER

Medical Administrative Series

M95-5 (rev.) 6 January 1998

### MANUAL TRANSMITTAL SHEET

SUBJECT: Appointment of Staff Clinicians at the NIH Clinical Center

- 1. Explanation of Material Transmitted: This bulletin transmits the policy and procedures for promoting or appointing clinicians at the Warren Grant Magnuson Clinical Center to permanent positions. The policy was approved by the Medical Board at its meeting on 7 March 1995 and modified by the Board of Scientific Directors on 29 March 1995. The policy was reviewed by the Medical Executive Committee on 6 January 1998 and approved with changes.
- 2. Material Superseded: MAS No. 95-5, dated 1 May 1995
- 3. Filing Instructions: Medical Staff Section

Remove: No. M95-5, dated 1 May 1995

Insert: No. M95-5 (rev.), dated 6 January 1998

#### DISTRIBUTION

Physicians, Dentists and Other Practitioners Participating in Patient Care

### POLICY AND COMMUNICATIONS BULLETIN THE CLINICAL CENTER

### Medical Administrative Series

M95-5 (rev.)

6 January 1998

SUBJECT: Appointment of Staff Clinicians at the NIH Clinical Center

### **PURPOSE**

This issuance transmits the current policy and procedures for processing recommendations for the promotion or conversion to permanent positions of members of the Medical Staff at the National Institutes of Health (NIH) who are clinical service-oriented physicians or dentists (Staff Physicians or Staff Dentists).

### POLICY

Proposals that clinically oriented physicians or dentists be hired in a permanent or temporary status at the NIH or promoted (to the Civil Service grade of GS-13, -14, or -15, or to the rank of 0-5 or 0-6 in the Commissioned Corps of the United States Public Health Service) shall be reviewed by the Medical Executive Committee before being submitted to the Associate Director for Clinical Research, NIH, for approval. Such an individual physician (or dentist) shall be termed a Staff Physician (or Staff Dentist); this status does not imply the granting of programmatic resources that are associated with the concept of tenure at NIH.

#### GENERAL CONSIDERATIONS

Tenure is defined at NIH as the long-term commitment of resources (i.e., funds, personnel, space) to an individual, based on his/her demonstrated ability to carry out independent biomedical research. Tenure may be granted directly or after a scientist has been formally placed on a tenure track for a period of time (up to eight years) and has established a satisfactory record of achievement. Upon attainment of tenure, the individual is referred to as a Senior Investigator, a position that connotes the management of independent resources. Physicians or dentists whose interests lie primarily in the conduct of research shall be considered for conversion to tenure or promotion by the NIH Central Tenure Committee with approval by the NIH Deputy Director for Intramural Research. In contrast, the Staff Physician or Staff Dentist position is a non-tenured position that is either permanent or a renewable term appointment. The primary role of the Staff Clinician is to deliver critical clinical services to the NIH, and/or Institute. As such, the Staff Clinician is expected to spend the majority of his/her time in the provision of clinical services, and the support of clinical research. The Staff Clinician is expected to provide clinical leadership and the highest level of clinical Therefore, performance will be evaluated on the level and quality of the clinical activities.

As the Staff Clinician position primarily involves clinical care and service, in general, it will not receive resources to conduct independent laboratory or clinical research. Resources for the clinical mission will be provided by the relevant Institute or Clinical Center. However, Institutes or the Clinical Center may provide resources for the conduct of clinical or laboratory research on a case-by-case basis. Such research will be sponsored and supervised by a tenured or tenure track investigator and will undergo review by the Board of Scientific Counselors. As it is expected that the collaborative contribution of the Staff Clinician to research will be recognized appropriately by authorship on publications, the Staff Clinician is encouraged to publish. However, selection and promotion are not based on the level or productivity of independent research.

### CRITERIA FOR APPOINTMENT AND PROMOTION OF STAFF CLINICIANS (See Attachment A)

Appointments and promotion of Staff Physicians will be based on the following:

- The individual is board eligible or board certified in his/her area of expertise
- The individual provides superior and efficient clinical care in his/her area of expertise
- The individual works collaboratively to facilitate the conduct of investigation
- The individual supports the clinical infrastructure by serving on important clinical committees
- The individual supports clinical training programs
- The individual shows excellence in clinical teaching activities
- The individual spends the majority of his/her time in these clinical activities

Equal Employment Opportunity Considerations: Candidates for positions as Staff Physicians or Staff Dentists will ordinarily be selected from one of two sources. Those candidates who have served as Clinical Associates, Senior Staff Fellows, Experts, or under similar appointments were subject to the EEO process of selection from a pool of applicants identified by a broad advertisement process during their initial recruitment. When an Institute or the Clinical Center wishes to hire a non-NIH physician or dentist, care should be taken to employ a competitive process, including national searches and broad advertising as appropriate, to assure opportunities for all.

### **PROCEDURES**

Before a position for a Staff Physician or Staff Dentist is established, the Scientific Director of an ICD, or the Director, CC, with advice from the Clinical Director, must determine that the Branch (or Laboratory, or Department) has the resources to support such a position. A supportive review of the Laboratory/Branch/Department by the relevant Board of Scientific Counselors (supplemented with ad hoc reviewers as necessary) is required.

### **Origination**

To request that a physician or dentist be converted to a Staff position, the Institute Laboratory or Branch Chief (or Clinical Center Department Head) will address a memorandum, through the Institute Clinical Director (the Deputy Director for Clinical Care in the Clinical Center) and Scientific Director, to the Associate Director for Clinical Research, NIH. This memorandum will include the following information:

- 1. a description of the position, showing how it is integral to the clinical service needs of the NIH, and how it meets the criteria for a Staff Clinician position. This would include discussion of the type and amount of teaching and/or clinical service expected. If any time will be spent in the conduct of research separate from the clinical services detailed above, this should be described and the sponsoring tenured or tenure-track investigator named. If this is a new position, the memo should describe the need for the position in the Laboratory/Branch (Clinical Center Department). There also should be a statement from the relevant Board of Scientific Counselors indicating a recent positive review of the Branch/Department.
- 2. documentation of the candidate's credentials and accomplishments, showing how the candidate satisfies the position's requirements. The memorandum may cite the individual's abilities in research, but it is emphasized that appointment to the position of Staff Clinician will be based primarily on the criteria listed above.

For individuals currently employed at the NIH, it is expected that a recommendation for promotion or conversion to permanent status will be based on observation of an individual's performance for at least two years while engaged in duties consistent with the position under consideration. Thus, the memo should indicate how long the candidate has been at NIH and in the Laboratory/Branch (CC Department), his/her current position or rank, and should indicate that a majority (i.e., over 50%) of the candidate's time is committed to the provision of clinical service, and, if permanent status is requested, that the teaching and/or clinical care provided by the candidate is of sufficient quality to justify conversion to permanent status.

For individuals hired from outside the NIH, the memo should include documentation of how the candidate's experience relates to the proposed position. Ideally, a complete application for Medical Staff appointment and clinical privileges, including all required supporting documentation, will accompany the initial request for appointment of a Staff Clinician, and will be approved before an Institute (or Clinical Center Department) makes a commitment to hire such an individual. If an employment commitment is made to the individual before the Credentials Committee has reviewed his/her credentials, and if the Committee subsequently determines that he/she cannot be recommended for Medical Staff membership and clinical privileges in the Clinical Center, the responsibility for resolving the problem will rest with the involved Institute Clinical Director (or Clinical Center Department Head) and Scientific Director.

- 3. A description of the present and proposed salaries (including bonuses and other additional pays) should be included for both current employees, and direct hires. If a Title 38 or Title 42 pay mechanism is proposed, that package may be submitted for consideration concurrently or after approval of the Staff Clinician recommendation. In cases of direct hires, it is occasionally desirable to obtain approval in principle of salary to be granted under title 38 or Title 42 authorities, before the Staff Clinician recommendation is considered. Such approval is contingent upon subsequent approval of the Staff Clinician appointment.
- 4. Following the initiator's signature, the memo should end with a check-off line for approval/disapproval as well as a signature and date line for the Associate Director for Clinical Research, NIH.

In addition to the memorandum described above, the current curriculum vitae of the individual will be supplied, along with the position description (for Civil Service employees) or the billet description (for commissioned officers) of the position to which the individual will be appointed, and materials from the ICD/Clinical Center Promotion and Tenure Committee as detailed below.

The Institute/Clinical Center's Promotion and Tenure Committee will evaluate the candidate. It may choose to interview the candidate as well as the Branch/Laboratory (Department) Chief. The Committee will solicit letters of recommendation that attest to the candidate's clinical skills as well as his/her ability to contribute to the clinical research environment at NIH. Six or more such letters will be requested. (Attachment B depicts a sample solicitation letter.) These letters may come from members of the intramural program, but for candidates who are current NIH employees, letters may not be

solicited from members of the candidate's Branch/Laboratory (Department). Letters of recommendation from individuals outside NIH are encouraged, but not required. These letters are to be addressed to the Chair of the Institute/Clinical Center's Promotion and Tenure Committee. The Tenure and Promotion Committee will provide for the package a memorandum that summarizes its evaluation, including a statement about the number of letters solicited, and responses received, and attaching a sample of the Committee's soliciting letter.

The package will include, as a cover sheet, a check list attesting to the completion of the various steps in the process and providing space for approval signatures. This check sheet is shown as Attachment C.

An original and three copies of the above materials will be submitted -- through the candidate's Clinical Director, Institute Promotion and Tenure Committee, and Scientific Director -- to the Executive Secretary of the Medical Executive Committee, who will ensure that the package is complete. In the Clinical Center, the materials will be submitted to the Promotion and Tenure Committee through the Deputy Director for Clinical Care. The three copies of the package will be forwarded by the Executive Secretary to the Chair of the Medical Executive Committee's Subcommittee on Promotion and Permanent Status.

### **Processing**

At its earliest convenience, but no less frequently than monthly, the Subcommittee on Promotion and Permanent Status will review the proposals it has received. At its discretion, the Subcommittee may meet with the recommending officials, the candidate, or with other parties of its choice. The Subcommittee is also encouraged to discuss the technical and clinical skills of the applicant with the references by phone. Upon completion of its review, the Subcommittee will make its report to the Medical Executive Committee in executive session. Upon hearing the report of the Subcommittee and after any discussion deemed necessary, the Medical Executive Committee will vote to support or not support the recommendation; a positive recommendation will require a vote of at least two-thirds of the The result of that vote, with a request for members present. approval of the recommendation, will be communicated by the Executive Secretary of the Medical Executive Committee to the

Associate Director for Clinical Research, NIH, who has final approval authority for these positions. If the Associate Director for Clinical Research approves the recommendation, the Executive Secretary of the Medical Executive Committee will send this approval, along with the original submitted material, to the Personnel Office of the Institute to which the candidate belongs, with a request that the promotion or conversion to a Staff Clinician position be effected. The candidate's Branch/Laboratory (Department) Chief, Scientific Director, and Clinical Director shall be informed of this action. recommendation is disapproved by the Associate Director for Clinical Research, the reason(s) for this disapproval will be communicated to the same three individuals, as well as to the Chair of the Medical Executive Committee. A sufficient number of copies of the approved package shall be forwarded by the Executive Secretary of the Medical Executive Committee to the office of the Executive Secretary of the Board of Scientific Directors so that the Chair (i.e., the Deputy Director for Intramural Research) and each member can be advised of the action for information purposes.

### RENEWAL OF TERM APPOINTMENT AND PROMOTION OF STAFF CLINICIANS

Renewal of a term appointment of Staff Clinicians will be granted based on evidence that the individual continues to provide excellent clinical services according to the criteria for initial appointment. Promotion of Staff Clinicians to a GS-13 or above (or, in the Commissioned Corps, to the grade of 0-5 [for Staff Physicians or Staff Dentists, tenure track candidates, or tenured scientists] or 0-6 [for those with tenure/permanent status]) is based on increasing stature and prominence as a clinician and leader. Evidence for this might include invitations to lecture on clinical topics outside the NIH, awards for teaching or clinical excellence, increased responsibility in important clinically-related committees, and membership on promotion and tenure committees that evaluate clinical care. (See Attachment A.)

For either renewal or promotion, the Institute Laboratory or Branch Chief (or Clinical Center Department Head) will address a memorandum, through the Institute Clinical Director (the Deputy Director for Clinical Care in the Clinical Center) and Scientific Director, to the Associate Director for Clinical Research, NIH. This memorandum will include:

- 1.) a description of the Staff Clinician position, with an attached position description or billet, and
- 2.) statements detailing the progress and accomplishments during the previous appointment period, indicating that the candidate has excelled in the elements of the position relevant to clinical care, participated on committees providing infrastructure and guidance to the clinical care or research mission of the NIH, participated in continuing medical education relevant to his/her area of clinical expertise, provided clinical leadership relevant to the level of the renewal or requested level of promotion, and, where relevant, contributed to clinical teaching.

The ICD/Clinical Center Committee on Promotion and Tenure will solicit at least four letters of recommendation for promotion/renewal, using the template in Attachment D. At least two letters should be from individuals not employed by candidate's employer (institute or Clinical Center). It is highly recommended that recommendations for promotion be solicited from national as well as local peers. This letter, the responses to this letter, and a notation of the numbers of letters solicited and received, will be included in the package. The package will also include the candidate's current curriculum vitae, and a statement from the Clinical Center regarding current credentialing status, and whether the candidate is a principal or associate investigator on research protocols.

The package will include, as a cover sheet, a check list attesting to the completion of the various steps in the process and providing space for approval signatures. This check sheet is shown as Attachment C.

An original and three copies of the above materials will be submitted -- through the candidate's Clinical Director, Institute Promotion and Tenure Committee, and Scientific Director -- to the Executive Secretary of the Medical Executive Committee, who will ensure that the package is complete. In the Clinical Center, the materials will be submitted to the Promotion and Tenure Committee through the Deputy Director for Clinical Care. The three copies of the package will be forwarded by the Executive Secretary to the Chair of the Medical Executive Committee's Subcommittee on Promotion and Permanent Status.

Promotions packages will be processed and considered by the Medical Executive Committee in a fashion identical to that described above for initial appointment of Staff Clinicians.

## ATTACHMENT A: GUIDELINES FOR THE APPOINTMENT AND PROMOTION OF INDIVIDUALS AS STAFF CLINICIANS

Individuals considered for appointment as Staff Clinicians will show excellence in the following areas; promotion will require demonstration of a sustained commitment and progressive maturation:

- 1. The individual provides superior and efficient clinical care in his/her area of expertise. Promotion to higher rank requires recognition of the sustained, outstanding clinical expertise, and may be demonstrated by statements from peers, evidence of a regional or national reputation as an authority in a clinical field; awards for clinical excellence; invitations to speak on clinical topics at regional or national meeting; membership on editorial boards of clinical journals; membership on society committees, or advisory panels designed to evaluate clinical excellence, and active participation in professional clinical organizations. Such individuals may also develop innovative approaches, technologies, instrumentation or systems of patient care in a clinical discipline.
- 2. The individual works collaboratively to facilitate the conduct of investigation. Such contribution may include clinical care of patients on specific protocols, organization of training programs that support a variety of protocols, and intellectual contributions through informal conversations and the critical reading of manuscripts from the research team.
- 3. The individual supports the clinical infrastructure by serving on important clinical committees, such as investigational review boards, clinical quality assurance, tenure and promotion, or tumor boards.
- 4. The individual supports clinical training programs as shown by participation as an attending clinician on a clinical service through which fellows or residents rotate; serving as a preceptor for clinical modules; acting as a mentor or advisor for individuals in training programs. Ideally, evaluations of the effectiveness of the individual would be provided.
- 5. The individuals shows excellence in clinical teaching activities. Promotion is based on outstanding documented contributions to clinical teaching, rather that the promise of such contributions. Examples include design and implementation of clinical courses and curricula; dissemination of information through continuing medical education offerings, visiting lectureships and grand rounds presentations; objective evaluations of bedside or formal lecturing effectiveness from residents, fellows or course participants; and publications related to teaching and learning. Promotion to the equivalent of GS 14 should require regional recognition and promotion to the equivalent of GS 15, national recognition as an educator and/or clinician.

Date

John J. Jones, M.D. Department of Internal Medicine State University Medical School Anytown, USA

Dear Dr. Jones:

The National Paradigm Institute is preparing a request that Dr. Samuel S. Smith, a member of its clinical staff, be granted status as a Staff Clinician at the National Institutes of Health's Clinical Center. This is a position at the GS-13 level, equivalent to the academic rank of Assistant Clinical Professor. A Staff Clinician is one who spends a majority of his or her time providing critical clinical services to the NIH, but who does not have oversight of independent research resources as do those who hold tenured positions.

As a part of the request for permanent status, letters of recommendation are solicited from individuals who have knowledge of the candidate's suitability for such a position. As Chair of the Institute's Promotion and Tenure Committee, I am therefore writing to ask if you would write a letter of recommendation for Dr. Smith, attesting to his clinical skills and participation in related activities, such as clinically-oriented committees and training programs.

If you will be able to write such a recommendation, please do so at your earliest opportunity and address the letter to me. To facilitate your evaluation, I enclose a copy of Dr. Smith's curriculum vitae. If you cannot write such a letter, please let me know immediately.

Thank you for your consideration of this request.

Sincerely yours,

Bernard B. Brown, M.D. Chair, Promotion and Tenure Committee National Paradigm Institute

# ATTACHMENT C NIH MEDICAL EXECUTIVE COMMITTEE PROMOTION OR CONVERSION TO PERMANENT POSITION SUMMARY SHEET

Candidate's Name	ICD	
Current Position Title:		
Current Pay Plan: Gr	rade/Step: Salary (total	l):
Proposed Position Title: Group Proposed Pay Plan: Group	rade/Step: Salary (total	<del></del>
		,
Recommended and Forward	ed by:	<del>_</del>
	<u>Name</u>	<u>Date</u>
☐ Lab/Branch Chief		
☐ Clinical Director		
☐ Chair, ICD Promotion & Tenure Committee		
☐ Scientific Director		
Through: (10/2C146) Executive Secretary, MEC		
☐ Chair, Subcommittee on Promotion and Permanent Status, MEC		
☐ Chair, MEC		
☐ Approved		
or		
□ Disapproved	Associate Director for Clinical Research	ch Date
Forwarded by Executive Secretor action on	retary, MEC, to ICD Personnel	Office
	Date	
Forwarded by Executive Secretisemination to Board of Sc		
Date		

### ATTACHMENT D: SAMPLE LETTER SOLICITING LETTERS OF RECOMMENDATION (PROMOTION)

Date

John J. Jones, M.D. Department of Internal Medicine State University Medical School Anytown, USA

Dear Dr. Jones:

The National Paradigm Institute is preparing a request that Dr. Samuel S. Smith, a Staff Clinician at the National Institutes of Health's Clinical Center, be promoted to a position at the GS-14 (15) level, equivalent to the academic rank of Associate Clinical Professor (Clinical Professor). A Staff Clinician is one who spends a majority of his or her time providing critical clinical services to the NIH, but who does not have oversight of independent research resources as do those who hold tenured positions. These individuals demonstrate excellent clinical skills, and participation in related activities, such as clinically-oriented committees, training programs and teaching. Promotion in this position requires demonstration of a sustained commitment and continued excellence and maturation in these areas.

As a part of the request for permanent status, letters of recommendation are solicited from individuals who have knowledge of the candidate's suitability for such a position. As Chair of the Institute's Promotion and Tenure Committee, I am therefore writing to ask if you would write a letter of recommendation for Dr. Smith, attesting to his clinical skills and participation in related activities, such as clinically-oriented committees and training programs.

If you will be able to write such a recommendation, please do so at your earliest opportunity and address the letter to me. To facilitate your evaluation, I enclose a copy of Dr. Smith's curriculum vitae. If you cannot write such a letter, please let me know immediately.

Thank you for your consideration of this request.

Sincerely yours,

Bernard B. Brown, M.D. Chair, Promotion and Tenure Committee National Paradigm Institute